

1732
SIFW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Michael J. Stevenson
SER. NO. 10/058,257
FILED: January 29, 2002
TITLE: SURFACING OF POLYOLEFIN OBJECTS WITH
ANTIMICROBIAL MATERIALS
UNIT: 1732
EXAMINER: Monica A. Fontaine

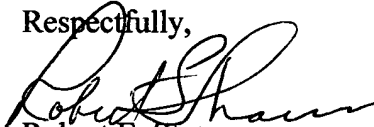
RESPONSE TO FEE DEFICIENCY NOTICE

THE COMMISSIONER FOR PATENTS
MAIL STOP AMENDMENT
P.O. Box 1450
Alexandria, Virginia 22313-1450

Dear Sir:

In the matter of the above-identified application, enclosed is payment for the deficiency in fees for the above-identified applicaiton. A copy of the Notice of Fee Deficiency is also enclosed with a fee transmittal form.

Respectfully,

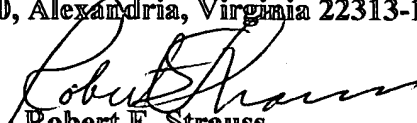

Robert E. Strauss
Reg. No. 19364

July 20, 2005

CERTIFICATE OF MAILING

The undersigned hereby certifies that this correspondence has been deposited on July 21, 2005 with the U.S. Postal Service first class postage prepaid and addressed to:

THE COMMISSIONER FOR PATENTS MAIL STOP AMENDMENT
P.O. Box 1450, Alexandria, Virginia 22313-1450


Robert E. Strauss

JUL 25 2005

PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 50.00**Complete if Known**

Application Number	10/058,257
Filing Date	01/29/2002
First Named Inventor	STEVENSON, Michael J.
Examiner Name	Monica A. Fontaine
Art Unit	1732
Attorney Docket No.	STEV-113

METHOD OF PAYMENT (check all that apply)☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☐ Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
50	25

Each independent claim over 3 (including Reissues)

200	100
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Multiple dependent claims

360	180
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Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 20 or HP =

x

=

Multiple Dependent Claims

Fee (\$)	Fee Paid (\$)
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HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 3 or HP =

x

=

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 =

/ 50 =

(round up to a whole number)

x

=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge): FEE DEFICIENCY NOTICE-Excess Claims

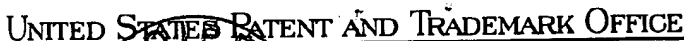
\$ 50.00

SUBMITTED BY

Signature	<i>Robert E. Strauss</i>	Registration No. (Attorney/Agent) 19,364	Telephone 928 541-7574
Name (Print/Type)	Robert E. Strauss	Date 07/20/2005	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



Paper No.

COPY

NOTICE OF FEE DEFICIENCY

^cThe informality regarding the payment of the fee is indicated below in connection with

- ☐ the original filing of the application and/or preliminary amendment (e.g. additional claim fees) ☒
- ☒ the reply filed on 5/2/05 because of the ☒ . The reply is not fully responsive to the prior Office action following matter(s). See 37 CFR 1.111 and 37 CFR 1.135.

FEE(S) DUE

- ☐ 1. The reply (e.g., amendment) is considered incomplete in that the funds in Deposit Account No. _____ are insufficient to cover the entire fee due. The balance* is due within the time period set below.
- ☐ 2. The reply (e.g., amendment) is considered incomplete in that the Credit Card payment to cover the entire fee due to _____ Account _____ (Card type + last 4 digits ONLY) was refused.

The balance* is due within the time period set below.

- ☐ 3. The reply (e.g., amendment) has not been entered, since applicant has failed to remit (or authorize charge to a Deposit Account or Credit Card) the fee as indicated on the attached Patent Application Fee Determination Record. Remittance or authorization is due within the time period set below.
- ☒ 4. The filing fee of \$ _____ submitted in this application is insufficient.
A balance of \$ 50,000 is due for presentation of excess claims (37 CFR 1.16(b) & (c)).
- ☐ 5. Other.

Explanation (Provide specific details of the required correction in order to assist the applicant. Indicate whether a service charge has been added to the fee due):

APPLICANT IS GIVEN A TIME PERIOD OF **ONE (1) MONTH or THIRTY (30) DAYS** FROM THE MAILING DATE OF THIS **NOTICE**, WHICHEVER IS LONGER, WITHIN WHICH TO REMIT THE FEE OF \$100.00 IN ORDER TO AVOID ABANDONMENT. EXTENSIONS OF THIS TIME PERIOD MAY BE GRANTED UNDER 37 CFR 1.136.

THE INDICATED AMOUNT OF THE FEE(S) DUE IS SUBJECT TO CHANGE YEARLY ON OCTOBER 1 (37 CFR 1.16 & 1.21). THE AMOUNT OF THE FEE(S) DUE IS DETERMINED AS OF THE DATE A COMPLETE REPLY IS RECEIVED BY THE OFFICE (37 CFR 1.8 & 1.10). BECAUSE THE AMOUNT DUE IS NOT NECESSARILY THE FEE INDICATED ABOVE, IT IS RECOMMENDED THAT APPLICANT CHECK THE CURRENT FEE SCHEDULE WHICH IS POSTED ON THE USPTO'S WEBSITE AT: <http://www.uspto.gov/web/offices/ac/qs/ope/fees.htm>

***Service Charges:** There is a \$50 service charge for processing each payment refused (including a check returned "unpaid") or charged back by a financial institution (37 CFR 1.21(m)). There is a \$25.00 service charge for each month when the balance of a deposit account is below \$1000 at the end of the month (37 CFR 1.21(b)(2)).

Legal Instruments Examiner (LIE) or Clerk of Group

Inquires regarding this Notice should be addressed to the above at 571-212-9020 (insert Phone Number).